

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)USE FEC MAILING LABEL  
OR TYPE OR PRINTExample: If typing, type  
over the lines

DCI PAC

ADDRESS (number and street)

1828 L Street NW

Suite 400

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00412395

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☒July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2010

through

06

30

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Laurie Pieper

Signature of Treasurer

Electronically Filed by Laurie Pieper

Date

07

14

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 25

Write or Type Committee Name  
DCI PAC

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	11512.41
(b) Cash on Hand at Beginning of Reporting Period .....	12243.19	
(c) Total Receipts (from Line 19) .....	6211.06	14259.04
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	18454.25	25771.45
7. Total Disbursements (from Line 31) .....	9931.25	17248.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	8523.00	8523.00
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 25

Write or Type Committee Name

DCI PAC

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	5563.32	11113.32
(ii) Unitemized .....	647.74	3145.72
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	6211.06	14259.04
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	6211.06	14259.04
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	6211.06	14259.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	6211.06	14259.04

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	3431.25	6248.45	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	3431.25	6248.45	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6500.00	10000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	1000.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	1000.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	9931.25	17248.45	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9931.25	17248.45	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	6211.06	14259.04
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6211.06	13259.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3431.25	6248.45
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3431.25	6248.45

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 25

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DCI PAC

**A.**

Full Name (Last, First, Middle Initial)

Victor E Bernson

Mailing Address 788 Marston Court

City

Millersville

State

MD

Zip Code

21108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5543

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Victor E Bernson

Mailing Address 788 Marston Court

City

Millersville

State

MD

Zip Code

21108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5544

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Victor E Bernson

Mailing Address 788 Marston Court

City

Millersville

State

MD

Zip Code

21108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5545

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

DCI PAC

**A.**

Full Name (Last, First, Middle Initial)

Mark Blankenship

Mailing Address 841 Daverton Rd.

City

Charleston

State

WV

Zip Code

25303

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MBE LLCOccupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	4	/	2	0	1	0

Transaction ID: SA11AI.5539

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Stacey Chamberlain

Mailing Address 109 S Virginia Ave

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLCOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	8	/	2	0	1	0

Transaction ID: SA11AI.5546

Amount of Each Receipt this Period

72.00

**C.**

Full Name (Last, First, Middle Initial)

Stacey Chamberlain

Mailing Address 109 S Virginia Ave

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLCOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	4	/	2	0	1	0

Transaction ID: SA11AI.5547

Amount of Each Receipt this Period

72.00

SUBTOTAL of Receipts This Page (optional) .....

644.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DCI PAC

**A.**

Full Name (Last, First, Middle Initial)

Stacey Chamberlain

Mailing Address 109 S Virginia Ave

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5548

Amount of Each Receipt this Period

72.00

**B.**

Full Name (Last, First, Middle Initial)

Daniel Combs

Mailing Address 1703 Asoleado Lane

City

Vienna

State

VA

Zip Code

22182

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5549

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Daniel Combs

Mailing Address 1703 Asoleado Lane

City

Vienna

State

VA

Zip Code

22182

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5550

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

472.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DCI PAC

**A.**

Full Name (Last, First, Middle Initial)

Daniel Combs

Mailing Address 1703 Asoleado Lane

City

Vienna

State

VA

Zip Code

22182

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5551

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Gary Feld

Mailing Address 3303 Russell Rd

City

Alexandria

State

VA

Zip Code

22305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5561

Amount of Each Receipt this Period

41.66

**C.**

Full Name (Last, First, Middle Initial)

Gary Feld

Mailing Address 3303 Russell Rd

City

Alexandria

State

VA

Zip Code

22305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.96

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5562

Amount of Each Receipt this Period

41.66

**SUBTOTAL** of Receipts This Page (optional) .....

283.32

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DCI PAC

**A.**

Full Name (Last, First, Middle Initial)

Ebonie Hall

Mailing Address P.O. Box 853

City

Bowie

State

MD

Zip Code

20718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5563

Amount of Each Receipt this Period

72.00

**B.**

Full Name (Last, First, Middle Initial)

Ebonie Hall

Mailing Address P.O. Box 853

City

Bowie

State

MD

Zip Code

20718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5564

Amount of Each Receipt this Period

72.00

**C.**

Full Name (Last, First, Middle Initial)

Ebonie Hall

Mailing Address P.O. Box 853

City

Bowie

State

MD

Zip Code

20718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5565

Amount of Each Receipt this Period

72.00

**SUBTOTAL** of Receipts This Page (optional) .....

216.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DCI PAC

**A.**

Full Name (Last, First, Middle Initial)

Timothy N Hyde

Mailing Address 9062 Tower House Place

City

Alexandria

State

VA

Zip Code

22308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5566

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Timothy N Hyde

Mailing Address 9062 Tower House Place

City

Alexandria

State

VA

Zip Code

22308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5567

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Timothy N Hyde

Mailing Address 9062 Tower House Place

City

Alexandria

State

VA

Zip Code

22308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5568

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DCI PAC

A.

Full Name (Last, First, Middle Initial)

Hillary Maxwell

Mailing Address 3301 S Stafford St.  
Apt B2City State Zip Code  
Arlington VA 22206FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLCOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5580

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Hillary Maxwell

Mailing Address 3301 S Stafford St.  
Apt B2City State Zip Code  
Arlington VA 22206FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLCOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5581

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Brian S McCabe

Mailing Address 157 Shaker Road

City State Zip Code  
Canterbury NH 03224FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLCOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5582

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DCI PAC

**A.**

Full Name (Last, First, Middle Initial)

Brian S McCabe

Mailing Address 157 Shaker Road

City

Canterbury

State

NH

Zip Code

03224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5583

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Brian S McCabe

Mailing Address 157 Shaker Road

City

Canterbury

State

NH

Zip Code

03224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5584

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Christian Myers

Mailing Address 5983 9th St. North

City

Arlington

State

VA

Zip Code

22205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5542

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DCI PAC

**A.**

Full Name (Last, First, Middle Initial)

Andrew O'Brien

Mailing Address 5301 Marilyn Drive

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI

Occupation

Assistant Account mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5585

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

Andrew O'Brien

Mailing Address 5301 Marilyn Drive

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI

Occupation

Assistant Account mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5586

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

Andrew O'Brien

Mailing Address 5301 Marilyn Drive

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI

Occupation

Assistant Account mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5587

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DCI PAC

**A.**

Full Name (Last, First, Middle Initial)

Susan Reiche

Mailing Address 11 Knollwood Trail East

City

Mendham

State

NJ

Zip Code

07945

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.5593

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Reiche

Mailing Address 11 Knollwood Trail East

City

Mendham

State

NJ

Zip Code

07945

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5594

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Reiche

Mailing Address 11 Knollwood Trail East

City

Mendham

State

NJ

Zip Code

07945

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLC

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5595

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DCI PAC

A.

Full Name (Last, First, Middle Initial)

Kelly Robertson

Mailing Address 616 S Fairfax St.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLCOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5596

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Kelly Robertson

Mailing Address 616 S Fairfax St.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLCOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5597

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Kelly Robertson

Mailing Address 616 S Fairfax St.

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCI Group LLCOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5598

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) .....

600.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DCI PAC

**A.**

Full Name (Last, First, Middle Initial)

Paul Ryan

Mailing Address 1111 Army - Navy Dr. #1007

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DCI Group LLC

Occupation  
Senior Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5599

Amount of Each Receipt this Period

84.00

**B.**

Full Name (Last, First, Middle Initial)

Paul Ryan

Mailing Address 1111 Army - Navy Dr. #1007

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DCI Group LLC

Occupation  
Senior Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5600

Amount of Each Receipt this Period

84.00

**C.**

Full Name (Last, First, Middle Initial)

Paul Ryan

Mailing Address 1111 Army - Navy Dr. #1007

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DCI Group LLC

Occupation  
Senior Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5601

Amount of Each Receipt this Period

84.00

**SUBTOTAL** of Receipts This Page (optional) .....

252.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DCI PAC

**A.**

Full Name (Last, First, Middle Initial)

Miriam Warren

Mailing Address 1619 R Street NW  
# 405

City State Zip Code  
Washington DC 20009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DCI Group LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.5605

Amount of Each Receipt this Period

72.00

**B.**

Full Name (Last, First, Middle Initial)

Miriam Warren

Mailing Address 1619 R Street NW  
# 405

City State Zip Code  
Washington DC 20009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DCI Group LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5606

Amount of Each Receipt this Period

72.00

**C.**

Full Name (Last, First, Middle Initial)

Miriam Warren

Mailing Address 1619 R Street NW  
# 405

City State Zip Code  
Washington DC 20009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DCI Group LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.5607

Amount of Each Receipt this Period

72.00

**SUBTOTAL** of Receipts This Page (optional) .....

216.00

**TOTAL** This Period (last page this line number only) .....

5563.32

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
DCI PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) DCI Group, LLC</p> <p>Mailing Address 1828 L St. NW Ste 400</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement March DC Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5536</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) DCI Group, LLC</p> <p>Mailing Address 1828 L St. NW Ste 400</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement April DC Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5537</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Level671,LLC</p> <p>Mailing Address PO Box 53190</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Web Support</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5610</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 250.00</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
DCI PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Patton Boggs	<b>Transaction ID:</b> SB21B.5532 <b>Date of Disbursement</b>																				
Mailing Address 2550 M St. NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	2		2	0	1	0												
City Washington State DC Zip Code 20037	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement April Legal Expenses Candidate Name	<table border="1"> <tr> <td colspan="10">3.75</td> </tr> </table>	3.75																			
3.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Patton Boggs	<b>Transaction ID:</b> SB21B.5534 <b>Date of Disbursement</b>																				
Mailing Address 2550 M St. NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	2		2	0	1	0												
City Washington State DC Zip Code 20037	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement April Legal Fees Candidate Name	<table border="1"> <tr> <td colspan="10">802.50</td> </tr> </table>	802.50																			
802.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Star Financial Management LLC	<b>Transaction ID:</b> SB21B.5609 <b>Date of Disbursement</b>																				
Mailing Address 20118 N 67th Ave Ste 300-615	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	7		2	0	1	0												
City Glendale State AZ Zip Code 85308	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Jan - March Accounting Services Candidate Name	<table border="1"> <tr> <td colspan="10">825.00</td> </tr> </table>	825.00																			
825.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**1631.25**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
DCI PAC

A.

Full Name (Last, First, Middle Initial)  
Star Financial Management LLC

Mailing Address 20118 N 67th Ave  
Ste 300-615

City Glendale State AZ Zip Code 85308

Purpose of Disbursement  
Accounting Support April - May  
Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.5538

Date of Disbursement

/   /

Amount of Each Disbursement this Period

550.00

SUBTOTAL of Disbursements This Page (optional) .....

550.00

TOTAL This Period (last page this line number only) .....

3431.25

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
DCI PAC

<b>A.</b> Full Name (Last, First, Middle Initial) AMERIPAC: THE FUND FOR A GREATER AMERICA	<b>Transaction ID:</b> SB23.5615 <b>Date of Disbursement</b>																				
Mailing Address 607 14th Street, NW, Suite 800 --	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	4		2	0	1	0												
City Washington State DC Zip Code 20005	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) CHAD CAUSEY FOR CONGRESS	<b>Transaction ID:</b> SB23.5529 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 16966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	2		2	0	1	0												
City JONESBORO State AR Zip Code 72403	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name CHAD CAUSEY	Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) DAVID VITTER FOR US SENATE	<b>Transaction ID:</b> SB23.5528 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 8175	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	4		2	0	1	0												
City METAIRIE State LA Zip Code 70011	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name DAVID VITTER	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
DCI PAC

<b>A.</b>	<p>Full Name (Last, First, Middle Initial) <b>FRIENDS OF JIM CLYBURN</b></p> <p>Mailing Address <b>PO BOX 12567</b></p> <p>City <b>COLUMBIA</b> State <b>SC</b> Zip Code <b>29211</b></p> <p>Purpose of Disbursement Contribution <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>Candidate Name <b>JAMES E CLYBURN</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: <b>SC</b> District: <b>06</b></p>	<p><b>Transaction ID:</b> SB23.5518</p> <p>Date of Disbursement  <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">08</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p>Amount of Each Disbursement this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
<b>B.</b>	<p>Full Name (Last, First, Middle Initial) <b>FRIENDS OF MARY LANDRIEU INC</b></p> <p>Mailing Address <b>607 14TH STREET NW SUITE 800 SUITE 1434</b></p> <p>City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20005</b></p> <p>Purpose of Disbursement Contribution <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>Candidate Name <b>MARY L LANDRIEU</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: <b>LA</b> District: <b>00</b></p>	<p><b>Transaction ID:</b> SB23.5521</p> <p>Date of Disbursement  <span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p>Amount of Each Disbursement this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
<b>C.</b>	<p>Full Name (Last, First, Middle Initial) <b>PEOPLE FOR PEARCE</b></p> <p>Mailing Address <b>PO Box 2696</b></p> <p>City <b>Hobbs</b> State <b>NM</b> Zip Code <b>88241</b></p> <p>Purpose of Disbursement Contribution <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>Candidate Name <b>STEVAN E. PEARCE</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: <b>NM</b> District: <b>02</b></p>	<p><b>Transaction ID:</b> SB23.5523</p> <p>Date of Disbursement  <span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">14</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p>Amount of Each Disbursement this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2500.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
DCI PAC

A.

Full Name (Last, First, Middle Initial)  
PORTMAN FOR SENATE COMMITTEE

Mailing Address 8331 LITTLE HARBOR DRIVE

City CINCINNATI State OH Zip Code 45244

Purpose of Disbursement  
Contribution

Candidate Name  
ROB PORTMAN

Office Sought: ☐ House  
☒ Senate  
☐ President

State: OH District: 00

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: SB23.5526

Date of Disbursement

/   /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

6500.00



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 25 / 25

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
DCI PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Level671,LLCNature of Debt (Purpose):  
Web Support

Mailing Address PO Box 53190

City State ZIP Code  
Washington DC 20009

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD10.5511

Amount Incurred This Period

0.00

Payment This Period

250.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Star Financial Management LLCNature of Debt (Purpose):  
Jan - March Accounting ServicesMailing Address 20118 N 67th Ave  
Ste 300-615City State ZIP Code  
Glendale AZ 85308

Outstanding Balance Beginning This Period

825.00

Transaction ID: SD10.5509

Amount Incurred This Period

0.00

Payment This Period

825.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

0.00